

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) ALEX-P01-112																									
Application Number 10/583,056		Filed	March 16, 2007																								
For NOVEL ANTI-DC-SIGN ANTIBODIES																											
Art Unit 1644	Examiner G. R. Ewoldt																										
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.																											
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):																											
<table> <thead> <tr> <th></th> <th><u>Fee</u></th> <th><u>Small Entity Fee</u></th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$150</td> <td>\$75</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$560</td> <td>\$280</td> <td>\$ 560.00</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$1270</td> <td>\$635</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1980</td> <td>\$990</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2690</td> <td>\$1345</td> <td>\$ _____</td> </tr> </tbody> </table>					<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$150	\$75	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$560	\$280	\$ 560.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1270	\$635	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1980	\$990	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2690	\$1345	\$ _____
	<u>Fee</u>	<u>Small Entity Fee</u>																									
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$150	\$75	\$ _____																								
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$560	\$280	\$ 560.00																								
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1270	\$635	\$ _____																								
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1980	\$990	\$ _____																								
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2690	\$1345	\$ _____																								
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>18-1945</u>.</p>																											
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>																											
<p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>68,195</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____</p>																											
<u>/Jason S. Cathelyn/</u>		October 26, 2011																									
<u>Signature</u>		Date																									
<u>Jason S. Cathelyn, Ph.D.</u>		(617) 951-7725																									
<u>Typed or printed name</u>		Telephone Number																									
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>																											
<input checked="" type="checkbox"/>	Total of <u>1</u> forms are submitted.																										